BIBLIOTHECA MEDICA CANADIANA

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BIBLIOTHECA MEDICA CANADIANA

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The Bibliotheca Medica Canadiana is a vehicle for providing increased communication among all health libraries and librarians in Canada, but has a special commitment to reach and assist the smaller, isolated health library worker. Contributors should consult recent issues for examples of the types of material and general style sought by the publication. Queries to the editors are also welcome. Submissions in English or French are welcome, preferably in both languages.

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Bibliotheca Medica Canadiana veut améliorer la communication entre toutes les bibliothèques eux-mêmes mais plus particulièrement rejoindre et aider ceux qui oeuvrent seuls dans les petites bibliothèques. La rédaction recevra avec plaisir commentaires et opinions. Les articles, en français ou en anglais sont les bienvenus, mais il serait préférable de les rédiger dans les deux langues.

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FROM THE EDITORS

The Editor cannot, alas, compete in this issue with the travels of Dorothy Fitzgerald whose musings on the health library scene from Minneapolis to Sweden and Iceland follow in her **Word from the President.** CHLA in Montreal, however, provided food for thought, soul and body.

Hanna Waluzyniec, and the other members of the 1986 Organizing Committee, took to heart the conference theme, **In Pursuit of Excellence.** CHLA members who were lucky enough to attend were exposed to a wide variety of stimulating presentations on topics as varied as McGill's Osler Library, the 5th International Congress on Medical Librarianship and optical disc technology. Professor Margaret A. Somerville's keynote address on legal and ethical imperatives was enthusiastically received, as was the panel presentation on end user searching. This issue of **BMC** contains the minutes of the Annual General Meeting; conference papers will be published in 8(2).

So much for thought! Montreal is a city to warm the soul and feed the flesh. Thanks to Sandra Duchow delegates received a comprehensive guide to the city's restaurants. Fate brought us fine weather, the Chinese exhibit, **Treasures and Spendors**, and a wonderful retrospective on Miro's sculture and paintings. The banquet, which offered formidable portions of Greek food and entertainment, was very well attended and the Reception provided a fine beginning to the 10th Anniversary Meeting. Now that another milestone has passed one can only thank the Montreal team for their efforts and wish the B.C. organizing committee similar success in Vancouver next year.

This is my last issue as Editor of **BMC**, a responsibility I relinquish with some ambivalence. It has been a great learning experience, and Bonnie Stableford and Tom Flemming have been a joy to have as editorial colleagues. The knowledge and diligence they brought to the editorial process is exceeded only by the fastidious (not to say obsessive) attention they lavish upon food, wine and the finer things of life. Ah, I feel nostalgic already for those editorial meetings which were not, I hasten to add, charged to CHLA. (Bill Maes, our Treasurer, is a hard man). Thanks are due too to David Crawford, Bruna Ceccolini and others at McGill who were so helpful each issue at the zero hour, and to Robert Serre for his prompt translations. In particular I feel a gratitude to Susan Eckert of the O.M.A. who worked tirelessly in "pursuit of excellence" on behalf of you and me. May Tom and Lynn Dunikowski, the new Assistant Editor, fare as well. To them I say good luck and bon appetit! The readers, to whom I am also grateful, are in good hands.

Jan Greenwood
Editor

Tom Flemming
Assistant Editor

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A WORD FROM THE PRESIDENT

Dorothy Fitzgerald

During May and June of this year I travelled to Minneapolis, Sweden, Iceland and Montreal to meet with groups of health sciences librarians. I found it very interesting and informative to hear about the plans and concerns of each of these groups and would like to share with you just a few of the things I learned.

As President-Elect of CHLA I attended the Medical Library Association conference in Minneapolis in May as the CHLA Liaison to MLA. The MLA Executive and senior staff were well aware that 1986 is the 10th Anniversary of our association. This was acknowledged informally at MLA and formally at the CHLA Annual Conference by an official statement of congratulations. My work on the 1986 MLA Conference Program Committee and the MLA Membership Committee served in many ways as a vehicle for my liaison activities and provided me with many useful ideas for consideration by the CHLA Board. The related problems of recruiting new members and encouraging active participation in the association are not unique to CHLA.

The MLA conference was on "Partnerships", and papers were presented on this theme from a national, institutional and personal perspective. A particularly interesting event was an open round table discussion on medical (or health sciences) informatics. While there is no agreed on definition of "medical informatics" it is generally seen as the application of computer, information and decision sciences to solve problems in biology, medicine and health care delivery. The session on medical informatics, chaired by Nina Matheson, was the result of the American College of Physicians asking MLA to work in partnership with them to plan for the introduction of medical informatics to the medical curriculum. A one day pre- or post-conference symposium is planned for next year's MLA conference in Portland Oregon. Medical informatics is an increasingly important area with implications for all of us, as evidenced by NLM's recent planning process in developing its Long Range Plan.

Immediately following MLA I spent ten days in Sweden, primarily visiting the Regional Health University in Linkoping, a city of 300,000 about three hours south of Stockholm by train. This is the newest of Sweden's 6 medical schools and it will focus on primary care, teamwork training and a change in the professional's role in the direction of increased responsibility for preventive and health-promoting measures. This new Health University is admitting its first students in the Fall of 1986 and is adopting some of the principles of problem-based self-directed learning used at McMaster and recommended in the GPEP Report. Swedish health care, traditionally almost entirely hospital based, is moving toward a model incorporating primary health care as a core element.

My visit as a library consultant did provide the opportunity for me to learn about health sciences libraries in Sweden. I attended the equivalent of our HSRC Advisory Committee meeting, held at the Karolinska Institute in Stockholm. The Karolinska Library acts as the national medical library of Sweden and the members of the advisory committee are particularly interested in seeing an official regional network established for the country, with a strong back-up collection available at the Karolinska. Inadequate funds for developing comprehensive book and journal collections seems to be a general problem. Hospital libraries do appear, however, to place much more emphasis on patient resources than we do, with at least one hospital having a collection of hundreds of prints and music tapes and other resources to allow the patients to

make their rooms as pleasant as possible. As one might expect, the physical setting of each of the four libraries visited was extremely comfortable for users and staff alike, with extensive use of Scandinavian interior design. Attention to ergonomic issues clearly has a higher priority in Sweden than in Canada. Microcomputers are not much used thus far in health sciences libraries in Sweden, but a new library with the latest in computer technology for health sciences students is being planned for the Health University in Linkoping. There is a Medical Librarians Committee of the Swedish Library Association rather than a separate association like CHLA. As in Canada the health sciences library community is small and widely dispersed and there is a felt need for closer ties with colleagues in similar settings. To this end the first meeting of European medical librarians will be held in Brussels this Fall.

I spent 5 days visiting friends in Iceland on the way home and they, in turn, arranged for me to spend a day with some of their hospital librarian colleagues in Reykjevik. Iceland is a fascinating country of 240,000 people, 86,000 of whom live in Reykjevik. Only 12 hospitals and health care institutions (of a total of 100) have libraries which offer regular services. There is close co-operation between the health sciences libraries in Iceland, and a free interlibrary loan system has been established. Since 1980 one of the hospital librarians has had direct access, by microcomputer, to MEDLINE and Dialog for on-line searches. As yet this is the only introduction of microcomputers in health sciences libraries in Iceland. The undergraduate medical school is part of the University of Iceland and has four quite separate departmental libraries. I was given a tour of the construction site where an old nursing residence is being converted to one large central medical library for the university. It was fascinating to discuss the possibilities regarding space and services. The major goal of the 15 member health sciences library community is to establish a central medical library for Iceland. This move at the university may well be the first major step in meeting this goal. While collections are not at all extensive in Iceland, they do have on-line access to the Karolinska in Stockholm for document delivery. As there are no residency programs in Iceland the libraries must contend with the unusual problem that physicians return after having trained in a wide variety of countries and requesting that materials be purchased in a variety of languages. There is a small core of very enthusiastic librarians in Reykjevik which is keen to establish a co-ordinated network of resources and services. They were particularly interested in the Canadian Library of Family Medicine as a possibly useful organizational model for their purposes.

The last leg of my series of trips in that five week period was the CHLA conference in Montreal. On many counts it was a very successful meeting, as reflected in the conference contributions to **BMC**, some of which will appear in 8(2). I couldn't help reflecting that many of the plans and concerns that were discussed informally in Montreal were also the issues that had been raised by our colleagues in Minneapolis, Sweden and Iceland.

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UN MOT DE LA PRÉSIDENTE

Dorothy Fitzgerald

En mai et juin cette année, j'ai visité Minneapolis, la Suède, l'Islande et Montréal, où j'ai rencontré des groupes de bibliothécaires en sciences de la santé. Il a été à la fois intéressant et instructif d'entendre parler des projets et des préoccupations de chacun de ces groupes et je voudrais partager avec vous quelques-unes de ces expériences.

À titre de présidente élue de l'ABSC, j'ai assisté à la conférence de la Medical Library Association, tenue à Minneapolis en mai, en tant qu'agente de liaison entre l'ABSC et la MLA. Le conseil et la direction de la MLA savaient que 1986 marque le 10e anniversaire de notre Association et l'occasion a été soulignée officieusement à la conférence de la MLA et officiellement au congrès annuel de l'ABSC par une note de félicitations. Ma participation au comité du programme de la conférence 1986 de la MLA et au comité d'adhésion de la MLA m'a donné plusieurs occasions de jouer mon rôle de liaison tout en me suggérant des idées intéressantes pour le bureau de direction de l'ABSC. Nous ne sommes pas seuls à vouloir recruter de nouveaux membres et encourager une participation active.

La conférence de la MLA avait comme thème "Partnerships" et les exposés ont abordé ce sujet sur le plan national, institutionnel et personnel. Tout particulièrement, une table ronde a permis un débat libre sur l'informatique médicale (ou des sciences de la santé). Même si aucune définition de l'informatique médicale n'est acceptée à l'unanimité, on la considère généralement comme l'application des sciences de l'information et de la prise de décisions à la solution de problèmes en biologie, en médecine et en soins de santé. La séance sur l'informatique médicale, présidée par Nina Matheson, a été organisée à la demande de l'American College of Physicians, qui désirait que la MLA collabore avec lui à l'introduction de l'informatique médicale dans le programme d'études médicales. Un colloque d'une journée est prévu avant ou après la conférence de la MLA qui doit avoir lieu l'an prochain à Portland (Oregon). L'informatique médicale est un domaine de plus en plus important qui nous intéresse tous, comme l'indique la récente démarche de la NLM en ce qui concerne son plan à long terme.

Immédiatement après la conférence de la MLA, j'ai passé dix jours en Suède, où j'ai surtout visité l'université régionale de la santé à Linköping, une ville de 300 000 habitants environ trois heures au sud de Stockholm en train. C'est la plus récente des six écoles médicales de la Suède et elle est axée sur les soins primaires, la formation en équipe et l'évolution du rôle des professionnels dans le sens d'une plus grande responsabilité en ce qui concerne les mesures de prévention et de promotion de la santé. Cette nouvelle université de la santé acceptera ses premiers étudiants à l'automne de 1986 et elle a adopté quelques-uns des principes de l'apprentissage auto-dirigé à base de problèmes utilisés par McMaster et recommandés dans le rapport GPEP. Les services de santé suédois, établis presque uniquement dans les hôpitaux par tradition, se dirigent vers un modèle qui intègre les soins de santé primaires comme élément clé.

Ma visite en tant que bibliothécaire-conseil m'a permis d'observer les bibliothèques des sciences de la santé en Suède. J'ai assisté à l'équivalent d'une réunion de notre comité consultatif de CBSS, tenue à l'institut Karolinska de Stockholm. La bibliothèque de l'institut Karolinska est la bibliothèque médicale nationale de la Suède et les membres du comité consultatif s'intéressent tout particulièrement à l'établissement d'un réseau régional officiel pour la Suède, doté d'une forte collection de réserve à

l'institut Karolinska. Le manque de fonds pour des collections globales de livres et de revues semble constituer un problème général. Par contre, les bibliothèques d'hôpital semblent accorder beaucoup plus d'importance que nous ne le faisons aux ressources pour les malades; au moins un hôpital possède des centaines de gravures et d'enregistrements musicaux et d'autres ressources qui permettent aux malades de donner à leur chambre une ambiance aussi agréable que possible. L'aspect physique de chacune des quatre bibliothèques visitées était extrêmement confortable tant pour les utilisateurs que pour le personnel, l'art décoratif scandinave étant largement appliqué. L'aspect ergonomique est nettement plus important en Suède qu'au Canada. Les micro-ordinateurs ne servent pas beaucoup, jusqu'à présent, dans les bibliothèques des sciences de la santé en Suède, mais une nouvelle bibliothèque dotée des techniques informatiques de pointe pour les étudiants en sciences de la santé est prévue pour l'université de la santé de Linköping. Au lieu d'une association distincte comme l'ABSC, l'association des bibliothèques de la Suède compte un comité de bibliothécaires médicaux. Tout comme au Canada, la communauté des bibliothèques des sciences de la santé est petite et très dispersée, de sorte qu'on ressent le besoin de contacts plus étroits avec des collègues dans une situation semblable. Ainsi, la première réunion de bibliothécaires médicaux européens aura lieu cet automne à Bruxelles.

J'ai passé cinq jours en Islande à visiter des amis avant mon retour et, avec eux, j'ai pu rencontrer, pendant une journée, des collègues en bibliothéconomie hospitalière à Reykjavik. L'Islande est un pays fascinant de 240 000 habitants, dont 86 000 se trouvent à Reykjavik. Douze hôpitaux et établissements de santé seulement (sur un total de 100) comptent une bibliothèque qui offre des services réguliers. Il existe une étroite collaboration entre les bibliothèques des sciences de la santé en Islande et un réseau gratuit de prêts entre bibliothèques a été mis sur pied. Depuis 1980, un des bibliothécaires d'hôpital a directement accès, par micro-ordinateur, à MEDLINE et à Dialog pour les recherches en direct. Jusqu'à présent, c'est le seul recours à des micro-ordinateurs dans les bibliothèques des sciences de la santé en Islande. L'école médicale de premier cycle fait partie de l'université de l'Islande et elle compte quatre bibliothèques assez distinctes. J'ai pu visiter le chantier où une vieille résidence du personnel infirmier sera transformée en une bibliothèque médicale centrale pour l'université. C'était fascinant d'étudier les possibilités en matière d'espace et de services. Les 15 membres de la communauté des bibliothèques des sciences de la santé ont comme but principal d'établir une bibliothèque médicale centrale pour l'Islande. Ce projet universitaire est peut-être bien la première démarche décisive en ce sens. Même si les collections ne sont pas très vastes en Islande, on a accès en direct à la bibliothèque Karolinska de Stockholm pour la fourniture de documents. En l'absence de programmes de résidence en Islande, les bibliothèques reçoivent des médecins formés à l'étranger qui rentrent au pays des demandes de documents dans plusieurs langues. Il existe à Reykjavik un petit groupe de bibliothécaires dynamiques qui cherche ardemment à établir un réseau coordonné de ressources et de services. Ils s'intéressent tout particulièrement à la Canadian Library of Family Medicine comme modèle éventuel applicable à leur situation.

Ma dernière escale a été la conférence de l'ABSC à Montreal. Cette rencontre a été un franc succès à plusieurs égards, comme en témoigneront les exposés dans **BMC** (voir le numéro 8:2). Je n'ai pu m'empêcher d'observer que de nombreux projets et thèmes abordés à Montréal sont partagés par nos collègues à Minneapolis, en Suède et en Islande.

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These minutes, published for the benefit of CHLA members who were unable to attend the AGM, will not be approved until the 11th Annual General Meeting to be held in Vancouver, 1987.

MINUTES

TENTH ANNUAL GENERAL MEETING

Montreal, June 18, 1986

Respectfully submitted by:

Jan Greenwood, President-Elect for
Bonnie Stableford, Secretary

1. Opening Remarks

President Diana Kent opened the meeting by thanking Hanna Waluzyniec, the Conference Chairperson and her committee members, for organizing an excellent meeting. She also extended her thanks to the 1985/6 Board of Directors and the Editors of **BMC** for their efforts.

2. President's Report

The President described the year as one that was both challenging and rewarding and outlined the activities of the Board of Directors during 1985/6 as follows:

2.1 The Health and Welfare Departmental Library was closed and the President noted that her letter of October 22 to the Honourable Jake Epp, M.P., received a personal reply for which she was grateful.

2.2 The National Library of Canada has experienced financial difficulties with respect to its Open Systems Interface. On behalf of CHLA D. Kent wrote a letter during July 1985 in support of this electronic communications system.

2.3 In June 1985 Kathy Eagleton of the Brandon General Hospital forwarded to the President, for consideration by the Board, a letter from Betty Lawrie, Director of The Management Information Systems (M.I.S.) Project. A subsequent letter from Ms. Kent to Mr. Donald Moffatt, Chairman, Federal-Provincial Sub-Committee on Productivity Improvement at the Department of National Health and Welfare resulted in a letter from one Dr. Hans H. Rubarth, Consultant, Health Administration, Institutional and Professional Services, Health Services Directoriate. In his letter, dated May 27, 1986, Dr. Rubarth suggested that CHLA might assist the development of Workload Measurement Systems for hospital libraries by preparing a world-wide literature search. Dorothy Fitzgerald has agreed to take on this project.

2.4 CISTI response to the brief entitled, **The Role of the Health Sciences Resource Centre and Health Information Needs**, submitted by CHLA and The Special Resource Committee of ACMC. (see p. 29).

The President recommended that the response from CISTI to the CHLA brief should be summarized in **BMC** and expressed satisfaction that CISTI had approved continuing MEDLINE support services for hospital libraries through HSRC.

2.5 **CANHEALTH**

125 copies of CANHEALTH have been sold at $10.00 each through the Canadian Libraries Association, allowing a net return to CHLA of $5.00 per copy.

2.6 **Consumer Health Committee**

The President noted that the Consumer Health Committee was dissolved during 1985/6.

2.7 **Education Committee**

At its meeting on February 14-15, 1986 the CHLA Board of Directors voted to dissolve the Education Committee as of May 31, 1986 in favour of appointing an Education Co-ordinator. (See Committee Reports, p. 16).

2.8 **Membership Survey and Continuing Education Needs Assessment Report**

Carol Morrison and Mary Conchelos were congratulated for their comprehensive membership assessment report which will be published in a future issue of **BMC**.

2.9 **CHLA Financial Status**

The President reviewed briefly the financial status of CHLA, reminding members that operating expenses had continued to exceed revenues to the point where the Board felt it necessary to increase personal memberships from $20.00 p.a. to $40.00 and subscriptions to $50.00. Furthermore the Board had taken the decision at its February 14-15, 1986 meeting to reduce publication of the **BMC** from 5 to 4 issues p.a.

2.10 **Development of Statistics Course**

A student of Professor Jeffrey Pendrill at the School of Library and Information Science, University of Western Ontario, is to develop a continuing education course outline on Canadian statistics. This project will be an integral part of the student's course, but the CHLA Board has approved a limited amount of funding to cover related expenses, e.g. photocopying.

2.11 **CHLA Strategic Plan**

The President thanked the Chapter Presidents and their Executives for their helpful response to the Strategic Planning Proposal. Members of the Board are addressing various issues that were raised and a draft will be circulated to all ten chapters for their further input.

2.12 The President's report was received for information only.

3. Minutes, 9th Annual General Meeting

3.1 These minutes were distributed to all in attendance at the June 18, 1986 meeting.

3.2 D. Kent noted two minor points of clarification in the minutes of the 9th Annual Meeting:

#4 **BMC** is being indexed in CINAHL and
#7 D. Fitzgerald's term of office on the HSRC Advisory Committee was extended to March (not May) 1986.

3.3 The minutes were moved, seconded and carried (MSC: Crawford, Harvey).

4. Treasurer's Report

4.1 The Treasurer reviewed the Interim Financial Statement for the period June 1, 1985 - May 31, 1986. (MSC: Maes, Waluzyniec)

4.2 He noted that the CIDA grant cited under **Revenue** was a loan only and that the $3,500 relating to conference operating expenditures would likely be absorbed by revenue from the conference.

4.3 Moved that Donald N. Charness be appointed Auditor for 1986/7. (MSC: Maes, Manning).

5. Report of the BMC Editor

5.1 J. Greenwood presented a report on behalf of herself and Assistant Editor, T. Flemming. (MSC: Greenwood, Swanson).

5.2 The CHLA Board has appointed L. Dunikowski, Canadian Library of Family Medicine, as the new Assistant Editor for 1986/7.

5.3 During 1985/6 policies and procedures were developed for **BMC** and these were approved at the Board meeting of June 14.

5.4 J. Greenwood conveyed particular thanks to T. Flemming and S. Eckert, Library Assistant at the Ontario Medical Association, and to the Association itself for its tremendous support. Gratitude was expressed also to **BMC**'s many contributors and supporters.

5.5 The outgoing Editor wished T. Flemming and L. Dunikowski good luck in their endeavours.

6. Committee Reports.

6.1 As committee reports are published herein only highlights follow:

6.1.1 1986 Conference: H. Waluzyniec reported that a total of 155 people had registered for the Conference. CE courses were fully attended and should break even financially. H. Waluzyniec thanked all of those who were involved. (MSC: Waluzyniec, Greenwood)

6.1.2 Education: D. Kent reported that since none of the existing members of the Education Committee was willing to stand as Chair, and since there had been no response to a call for members in **BMC**, she had assumed responsibility for the Committee until such time that it was formally dissolved at the February Board meeting. She confered with A. Lambrau with respect to CE courses for the 1986 conference. As mentioned earlier in these minutes, A. Barrett has been appointed Continuing Education Co-ordinator for a two-year period, to be reviewed after one year. (MSC: Kent, Ducas)

6.1.3 Membership: Linda Harvey, Chair of the Committee reported the existence of 358 members, representing all 10 provinces and including members in the United States, Australia and Norway. She thanked the Board members for their support and said how much she had enjoyed the opportunity to serve CHLA. (MSC: Harvey, Miranda).

6.1.3.1 The following motion came from the floor:

That CHLA creates a special membership at a reduced rate for retired members.

(MSC: Flower, Swanson).

It was agreed that this motion should be taken to the Board for further discussion.

6.1.4 Nominations/Elections: David Crawford reported that J. Greenwood had been elected President-Elect and that A. Barrett, now of the Kellogg Health Sciences Library, Dalhousie, had been elected to the Board for a two-year term. He noted further that in future years a President-Elect and two Directors would be elected each year. Before moving his report D. Crawford noted that he was stepping down from the Board after 10 years and thanked everyone for their support. (MSC: Crawford, Harvey).

7. Chapter Reports

Brief reports were presented by the Chapter Presidents or their representatives. All of these are published herein).

8. Other Reports

8.1 HSRC Advisory Committee

The report was presented by D. Fitzgerald who noted that she and C. Callahan will be replaced by C. Hoare, Hoffman LaRoche and D. Dryden, Charles Camsell General Hospital. The third representative A. Laycock, has one more year to serve.

8.1.1 The October 1985 Board Meeting in Winnipeg focused upon CHA's Info-health/InfoSanté initiative; CISTI's response to the CHLA-ACMC Brief ... [is excerpted herein]. (MSC: Fitzgerald, Allen)

8.2 CHLA/MLA Liaison

In her report D. Fitzgerald acknowledged the good wishes from MLA for CHLA's tenth anniversary. Unfortunately the MLA representative, Gerald Oppenheimer, was unable to attend the CHLA conference. (MSC: Fitzgerald, Crawford)

8.3 1987 Conference

Vancouver is to host the 1987 CHLA Annual Meeting which will take place May 24-27.

8.3.1 The MLA 1987 Meeting will be held May 17-22, with a possibility of a short post-conference informatics program, in Portland, Oregon.

9. Honorary Life Membership

D. Kent presented to William J. Fraser, better known as "Bill" to health librarians in Canada, an honorary life membership in CHLA. This award was in recognition of his being a founder of CHLA/ABSC and his continuing significant contributions to the health library community in Canada. Bill graciously responded to D. Kent and assured the members present that he would be around for some time to come.

10. Other Business

10.1 Mr. T.A. King, Director of the Wessex Medical Library at Southampton General Hospital and the University of Southampton, brought greetings to CHLA members from the Medical Health and Welfare group of the British Library Association. He was reassured to find that there were many similarities between health librarianship in Canada and the U.K. and was intrigued by such differences that exist. Mr. King will encourage his group to reciprocate the good will fostered by CHLA/ABSC in waiving his conference fee. The Medical Health and Welfare group will be holding its 1987 Annual Meeting in Aberystwyth, Wales but also holds monthly meetings which are planned well ahead; Mr. King invited any CHLA member interested in attending one of these meetings to contact him.

10.2 In celebration of CHLA/ABSC's tenth anniversary, an annual award of $500.00 will be made available to the chapter which best advances the aims of CHLA. This award was suggested by W. Maes and details of its administration will be worked out at the November Board meeting.

10.3 Transfer of the Executive

10.3.1 D. Kent again expressed thanks to the Board members and members at large for their support and, in particular, to D. Crawford and L. Harvey, who are departing from the Board, and to the Editors of **BMC**.

10.3.2 D. Fitzgerald thanked D. Kent on behalf of all the members for her very hard work as President. The meeting was adjourned at 3:15 p.m.

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CHLA/ABSC INTERIM FINANCIAL STATEMENT JUNE 1, 1985 - MAY 31, 1986

Bill Maes
Treasurer

Opening Balance June 1, 1985		$22,014.51
REVENUE		
CIDA Grant	1,000.00	
Memberships 1985-86	6,215.00	
Conference 1985	3,571.88	
Return of Conference Operating Grant	2,000.00	
Sales and Advertising	445.11	
Interest	24.99	
Funds Transfer (1)	726.02	13,993.00
Total Funds Available		$36,007.51
EXPENDITURES		
BMC Publication and Printing	4,076.95	
Travel	6,228.06	
Postage and Telephone	596.14	
Bank Charges	19.32	
Translations (President's Page)	525.60	
CHLA 1986 Conference Operating Grant	3,500.00	
Auditor's Report	150.00	
Sundry	1,107.03	16,203.10
Closing Balance at May 31, 1986		$19,804.41

STATEMENT OF ASSETS AT MAY 31, 1986

Bank -	Savings	$18,355.24
	Chequing	1,449.17
		$19,804.41

1. Monies accumulated in Edmonton (chiefly memberships and interest) before the transfer of CHLA funds to Calgary and after the completion of the auditor's report.

REPORT OF THE EDITORS - BIBLIOTHECA MEDICA CANADIANA

Jan Greenwood
Editor

Tom Flemming
Assistant Editor

1. SCHEDULE FOR VOLUME 7

Issue	Theme	Pages
#1	Conference Issue	44
#2	Co-operative Health Library Arrangements	52
#3	Rehabilitation	44
#4	Hospital Library Services	48
#5	End-user Searching	48
	Total:	**236**

2. FINANCIAL MATTERS

2.1 For a full account of **BMC** costs see the **CHLA/ABSC Interim Financial Statement June 1 - May 31, 1986** (p. 12).

2.2 At two Board meetings the subject of pursuing the possibility of raising additional revenues through advertising in **BMC** was discussed.

2.3 The Editors expressed extreme reluctance to get involved in advertising because of the additional administrative burden and the responsibilities to advertisers that would be entailed.

2.4 The Board instructed the Editors to pursue the matter of obtaining advertising revenue for the **covers** of each issue only but this matter remains unresolved at year-end.

3. BMC POLICIES AND PROCEDURES

3.1 Policies for contributors and editors were drafted by the Editors and approved by the Board in 1986.

3.2 J. Greenwood has drafted written procedures for **BMC** Editors, a copy of which has been given Tom Flemming (incoming Editor) and will be forwarded to the incoming Assistant Editor.

4. CHANGE IN SCHEDULE FOR VOLUME 8

4.1 At the February meeting of the CHLA Board a decision was made to reduce publication of **BMC** from five to four times p.a. The intention of the Board is to reduce production costs while maintaining the journal's quality.

5. ACKNOWLEDGEMENTS

5.1 The Editor wishes to thank the Board and Tom Flemming for their support during the past year, and to Bonnie Stableford for her able and patient instruction during 1984-5.

5.2 **BMC** owes an immense debt to Susan Eckert of the Ontario Medical Association Library for her diligent efforts during the past year, and to the Association itself for its considerable support.

5.3 In addition, the Editor is grateful to the many CHLA members who have expressed their support for **BMC**, and particularly to those who contributed papers. It has been a real pleasure to serve as **BMC** Editor.

6. NEW EDITORS

6.1 The Editors recommend to the Board that Ms. Lynn Dunikowski, Canadian Library of Family Medicine, be appointed to the position of Assistant Editor for 1986-7.

* * * * * * * * * *

REPORT OF THE MEMBERSHIP COMMITTEE, 1985/86

Linda Harvey
Chair

There are 358 CHLA/ABSC members, covering all 10 provinces, the U.S., Australia and Norway. There are also 42 subscribers to **Bibliotheca Medica Canadiana**, from Canada, the U.S., and England. Hospital libraries continue to account for almost half the membership. Membership information was sent to all chapter presidents, Canadian library schools, and selected libraries from the CISTI directory **Health Science Information in Canada - Libraries.** Although active recruitment by chapter presidents and response to mailings from the Membership Chair have been quite successful in recruiting new members, a disappointing number of members chose not to renew this past year. In order to determine why a form letter with a check-off list of reasons for non-renewal was sent to all lapsed members and to chapter presidents. Of 50 letters sent, 24 replies were received. Of these, 13 had or were intending to renew, 10 were either retired, unemployed or no longer in health librarianship, and only 1 found membership no longer beneficial. As well, other avenues for promoting CHLA/ABSC membership were investigated and presented to the Board.

As I am completing my two year term as Membership Chair I would like to take this opportunity to thank all members and particularly Board colleagues and chapter presidents for their enthusiastic and active participation in membership recruitment.

* * * * * * * * * * *

REPORT OF THE EDUCATION COMMITTEE 1985/86

Diana Kent
Acting Chair

The 1985/86 Education Committee consisted of four members out of a possible eight. They were located in Halifax, Ottawa, London and Winnipeg. Although a call for new members was published in the **BMC** in the Spring of 1985, and announcements were made at the CHLA/ABSC Annual Meeting in June, no new members came forward to join the Committee.

Because none of the remaining members wished to become the Chair and to assume the difficulties of communicating with Committee members residing in widely separated areas of the country, I assumed the role of Acting Chair.

ACTIVITIES

The Education Committee as a Committee has been dormant for the past year.

As Acting Chair, I conferred with the 1986 Conference Continuing Education Chair, Angella Lambrou, about the CHLA-sponsored courses to be offered in Montreal and their accreditation by the Medical Library Association. Because CHLA officially endorsed the MLA **Criteria of Quality** in June 1985, MLA readily accredited these two courses and no further difficulty with accreditation is expected for future courses.

In the Fall of 1985, I discussed with Margaret Taylor, the former Chair of the Education Committee, the necessity of having a CHLA liaison to the Canadian Library Association Continuing Education Co-ordinating Group. CLA insists that any CHLA liaison be a CLA member unless CHLA applies for special status. This matter has not been pursued as both M. Taylor and I agreed that there is little to be gained by having a CHLA/CLA continuing education representative at this time. However, a future CHLA Board may consider raising the possibility again.

As President, I polled the ten chapters by mail or telephone and asked for their opinions and suggestions about dissolving the Education Committee and replacing it with an Education Co-ordinator. The response was unanimous in favour of making this change. Therefore, the Board of Directors at its meeting on February 14-15, 1986 voted to dissolve the Education Committee as of May 31, 1986.

Ann Barrett, CHLA's newest Director, in her pre-election biographical statement expressed her interest in expanding CHLA's role in continuing education. After conferring with President-Elect, Dorothy Fitzgerald, I asked Ann to consider becoming CHLA's first Education Co-ordinator and she replied affirmatively.

RECOMMENDATION

Therefore, I recommend that Ann Barrett be appointed as Education Co-ordinator for two years with a review of performance and her interest in continuing in the position after one year.

HEALTH LIBRARIES ASSOCIATION OF B.C. ANNUAL REPORT 1985/86

Adrienne Clark
President

The outgoing executive consists of: Adrienne Clark of BCMLS, President; Ann Nelson of Hamber Library, Vice-President; Margery Nelles of Cancer Control Agency of B.C., Treasurer; Lee Perry of Woodward Biomedical Library, U.B.C., Secretary.

HLABC had 56 paid members. The four general meetings for the year were attended by an average of 35 members.

Energy was expended on a variety of activities:

HLABC Forum was published four times during the year.

Consumer Health: a Selected List, produced in March 1985, is out-of-print. The subject listing with annotations, describes publications available in local libraries.

The Union List of Serials of the Health Libraries Association of B.C., 1st ed., Toronto, McAinsh, 1985 appeared in October. It was distributed to twenty-three participating libraries. Eighteen further copies have been sold for $15.00 each but prepaid orders are still being accepted. An update is not planned for the coming year.

The organization's major activity since February has been the planning of the **Canadian Health Libraries Association, 11th Annual Meeting**, Vancouver, May 24-27, 1987. Nancy Forbes chairs the planning committee of 15 volunteers.

The incoming executive for 1986/87 is:

President:
Ann Nelson
Hamber Library
B.C. Children's Hospital
4480 Oak Street
Vancouver, B.C. V6H 3V4

Vice-President/ President-Elect:
Margaret Price
Woodward Biomedical Library
University of B.C.
2198 Health Sciences Mall
Vancouver, B.C. V6T 1N5

Treasurer:
Linda Einblau
BCMLS
1807 West 10th Ave.
Vancouver, B.C.
V6J 2A9

Secretary:
Patricia Young
Library
Vancouver Health Department
1060 West 8th Ave.
Vancouver, B.C.
V6H 1C4

Forum Editor: (Continuing)
Judy Neill
BCMLS
1807 West 10th Ave
Vancouver, B.C.
V6J 2A9

KINGSTON AREA HEALTH LIBRARIES ASSOCIATION ANNUAL REPORT

Gwen Wright
President

1) At the meeting of the O.H.A. Region 8 Librarians' Association on February 19, 1986, the name of the Association was changed to the Kingston Area Health Libraries Association. This was done to reflect better the nature of the expanded membership and to define more clearly the geographic area represented. The geographic boundaries remain those of O.H.A. Region 8, of which this Association is a Standing Committee.

2) Membership in the Association has expanded to include library staff from the Bracken Library, Kingston Public Library, the Cancer Clinic, hospitals in the surrounding region and individuals interested in maintaining contact with health care services. All members provide information to health care providers, or, in the case of the Kingston Public Library, to the public at large through its InfoHealth service. This service was developed as the result of joint interest and investigation by the Kingston hospital librarians, Bracken Library, Kingston Public Library, and others in the health care field, and facilitated by the Kingston Health Sciences Complex and the Kingston Frontenac and Lennox and Addington District Health Council. This Association is represented on the InfoHealth Advisory Board.

3) The provision of computerized literature searches of the National Library of Medicine databases and other health services related databases has grown in the past year. The libraries of the Kingston General Hospital and St. Mary's of the Lake Hospital have joined the Bracken Library and the library of Hotel Dieu Hospital in providing this service. A MEDLARS users group has been formed to enable librarians providing this service to share their expertise and problem-solving abilities.

4) As reported to you last year, the **Title Guide to Serials**, produced by St. Lawrence College Library, Kingston, is a co-operative project involving the hospital libraries Kingston, Bracken Library (Queen's) and the St. Lawrence College libraries on its three campuses. The Guide has been expanded to include the journal holdings of the Kingston Clinic of the Cancer Foundation and the health-related journals of the Kingston Public Library. The latest up-date of the Guide was produced in August of 1985, and is available for purchase from the St. Lawrence College Library, Kingston.

5) Since the last report to CHLA, the Association has held two meetings. A workshop on Quality Assurance for Hospital Libraries is planned for next year. In addition, the Executive has met three times to plan programmes, prepare reports for O.H.A. Region 8, and respond to matters of concern to CHLA.

MANITOBA HEALTH LIBRARIES ASSOCIATION ANNUAL REPORT

Ada M. Ducas
President

1985/86 Executive

President:	Ada M. Ducas, Health Sciences Centre
Vice President/ President Elect:	Doris Pritchard, Neilson Dental Library
Secretary:	Edith Konoplenko, Concordia Hospital
Treasurer:	Helene Proteau, Medical Library, University of Manitoba

The Manitoba Health Libraries Association (MHLA) has had a very interesting year highlighted by many decisions.

To date, we have had two general meetings. The first was held at the Manitoba Health Services Commission (MHSC). Mr. Fred Toll, Management Information Services, MHSC, gave an informative talk on the types of statistics the MHSC collects and the type of data that are culled from them. The results of the MHLA logo vote were announced during the business meeting. The membership of the MHLA voted to have the Emblem of Aesculapius (Greek God of Healing) as the official logo of the Association. The membership also voted to increase membership fees to $10.00 for personal, $20.00 for institutional and $15.00 for associate membership. The Association has ongoing projects that incur costs, and the additional money will help defray them.

The February meeting was held at Concordia Hospital. The programme consisted of a guest speaker, Ms. Joanne Dobson, Diabetes Education Co-ordinator at the Manitoba Department of Health. She gave an overview of diabetes education in Manitoba and talked about the uniqueness of the Diabetes Education Resource Centre in helping individuals and families cope with diabetes. The business meeting was highlighted by a discussion on having one MHLA meeting a year outside Winnipeg. It was agreed in principle that it would be desirable.

The Association participated in the 17th Annual Manitoba Health Conference on April 17. The theme this year was Excellence in Health Care. Mr. Andrew Cameron, Vice President of Information Systems, C.H.A., was the guest speaker. He talked about his philosophy on what "communication information" is, and briefly discussed "Infohealth/ Infosanté", a new electronic information service/gateway/network that C.H.A. officially launched across Canada on March 18. Though the network seems to be initially aimed at administrators, it does have immediate and important implications for health libraries. The second half of the programme consisted of a panel that responded to Mr. Cameron and gave their own insights. The panel comprised a moderator, a hospital administrator, an end-user, an information specialist and a librarian.

The Winnipeg Health Information Network (WHINET) is still in a state of limbo. A survey conducted last fall revealed that the WHINET concept is supported by hospital administrators in Winnipeg. Negotiations are currently proceeding with various funding bodies.

The first section of **Selected Book and Journals for Manitoba Health Care Facilities** was published. Although it was originally intended to be published as part of the **MHLA News**, the membership decided that it should be published separately. The initial section published was on Geriatrics. Future additions will be on Quality Assurance and Nursing.

The membership for the 1985/86 association year numbers 68 to date, with 34 personal, 33 institutional and one associate members.

The election of next year's executive has been completed. Judy Inglis has been elected Vice President/President Elect by acclamation. Kathy Gaudes was elected as Secretary and Helene Proteau was re-elected Treasurer.

In conclusion, I would like to thank both the Executive and the membership for their participation in MHLA committees and ongoing activities. Their support and enthusiasm made my job as president a pleasure. I wish the new Executive and Doris Pritchard, our President-Elect, a very productive and active year.

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MARITIME HEALTH LIBRARIES ASSOCIATION/ASSOCIATION DES BIBLIOTHEQUES SANTE MARITIMES: NOVA SCOTIA GROUP, ANNUAL REPORT 1985-86

Patricia MacNeil-Maxwell
President

A summary of the year's activities follows:

1. September 1985: Nova Scotia Health Libraries Association (NSHLA) joined with other groups across the country in expressing strong disapproval for the proposed move of Medlars accounts to the Canadian Hospital Association.

2. October 1985: NSHLA Executive met to discuss plans for 1985-86.

3. November 1985: First quarterly meeting of NSHLA. During the meeting, a motion was passed to make Ann Manning (Health Sciences Librarian, W.K. Kellogg Health Sciences Library, Dalhousie University) convenor for CHLA 1988.

4. The NSHLA newsletter is to be printed quarterly as a follow-up to chapter meetings.

5. February 1986: The Nova Scotia Health Libraries Association received approval from the CHLA/ABSC Board of Directors to change its name to the Maritime Health Libraries Association/Association des Bibliotheques Sante Maritimes. Meetings are to be held at least once annually in a province other than Nova Scotia.

6. February 1986: Second quarterly meeting. The Association approved the appointment of an Education Co-ordinator to work with local chapters in devising continuing education courses and workshops.

7. April 1986: New directory ready for distribution. The new title, **Health Libraries Directory of the Marittime Provinces 1985**, reflects the wider scope of the new edition, which includes health science collections in general. It is to be sold for $5.00/copy.

8. May 1986: Third quarterly meeting.

Overall, this has been a very productive year for this chapter. We have accomplished a great deal by increasing our membership, changing our name, having our newsletter published regularly, beginning to plan for CHLA 1988 and the printing of a new directory. We look forward to even more exciting projects as our membership continues to grow within the Maritime provinces.

MONTREAL HEALTH LIBRARIES ASSOCIATION ANNUAL REPORT 1985-1986

Claire Kelly
President

Past-President:	Arlene Greenberg
President:	Claire Kelly
Vice-President:	Louis-Luc Lecompte (resigned March 11/86)
Secretary:	Janet Joyce
Treasurer:	Irene Shanefield

Three meetings of MHLA were held in the last year. On October 15, 1985, Richard Janke, Public Services Systems Co-ordinator at the University of Ottawa spoke on "Librarians and End-User Searching". Janke spoke on instituting end-user searching and demonstrated "Colleague Prompt" Service.

Our second meeting was held in January 1986 when Elaine Waddington, Library Consultant and Librarian at the Royal Victoria Hospital spoke on "Saving Time and Having Fun with the Microcomputer in the Library". Elaine ably demonstrated some of the many options which make using a p.c. attractive.

The Annual Meeting and Banquet was held on May 8th at Le Bifteque.

Five executive meetings were held during the year. Our membership stands at 104. The Union List Committee has worked diligently with McAinsh to bring the List to fruition. Sixty-two libraries are participating. Final editing has taken place and publication is expected before late summer.

Membership has been approached to consider a consortium membership in USBE. Eight libraries have shown interest. A motion will be placed before the group and a committee will be struck if approval is given.

New Officers for 1986:

Past-President:	Claire Kelly
***President:**	Vacant
***Vice-President:**	Vacant
Treasurer:	Julia Main
Secretary:	Joanne Baird

* In a call for nominations, no names were received for these positions. A diligent effort is being made to find individuals willing to take on these duties. In the interim, Arlene Greenberg continues as Acting Past-President and Claire Kelly as Acting President.

NORTHERN ALBERTA HEALTH LIBRARIES ASSOCIATION ANNUAL REPORT

Donna Dryden
President

The Northern Alberta Health Libraries Association began the year's activities by assisting its sister chapter, the Southern Alberta Health Libraries Association, with the CHLA conference registration. Aside from the labour intensive tasks of receiving monies and writing receipts, we were able to take advantage of automation to produce the lists required for the various conference activities. All registration information was input into a DBASE III format. Using the DBASE commands and sorts, event lists were created. It was a highly successful operation.

Our first annual mid-summer social was held in July in honour of the midnight sun!

At our October meeting Jake Vanderbrink, from the Edmonton General Hospital Library, spoke about the new Millwoods Hospital and library. He presented the considerations and planning for the design of the new hospital library as well as the opportunities available for providing for a collection and service in both hospital locations.

Quality assurance was the topic of discussion at the March meeting. Participants shared their methods, standards, and items measured in a lively and enlightening discussion. As a result of the meeting a small group has undertaken to review the statistics compiled by the various libraries with a view to standardization for comparability.

Other projects that the chapter has worked on during the year have included lobbying in support of health libraries and investigation for use of duplicate exchange lists within the chapter. The chapter was initially approached to assist the Alberta Hospital Association with a teleconference on hospital libraries. Sylvia Chetner of the John W. Scott Health Sciences Library and Elizabeth Kavanagh of the Red Deer Regional General Hospital Learning Resources Centre presented a comprehensive and enlightening program. Finally, our much awaited Union List has been published and distributed to participating libraries.

The chapter has not formulated any concrete future plans. Topics of interest to the members include creation of Standards for Quality Assurance for Alberta Health Libraries; reporting mechanisms for sharing results; standards testing; and more involvement of persons providing library service in rural settings.

Our annual meeting was held on April 29th. We were fortunate to have as our speaker, Ellen Picard from the Faculty of Law, University of Alberta. Dr. Picard is involved with the Health Law Institute and we were treated to an informative evening.

The executive of NAHLA for 1985-86 was Donna Dryden, President; Lea Starr, Vice-President; Francine Lapointe, Secretary; and Sandra Shores, Treasurer. The executive for the upcoming year is Lea Starr, President; Francine Lapointe, Vice-President; Lloanne Walker, Secretary; and Pat Baxter, Treasurer.

OTTAWA/HULL HEALTH LIBRARIES GROUP - ANNUAL REPORT

Elizabeth Hawkins Brady
President

1985/86 Executive:

President:	Elizabeth Hawkins Brady, Canadian Nurses Association
Secretary-Treasurer:	Linda Wheeler, Sport Information Resource Centre
Program Coordinator:	Dianne Kharouba, Health Sciences Resource Centre, CISTI

1985/86 Program:

1. October 10, 1985. National Sport and Recreation Centre

   A business meeting was held, followed by presentations on Sport Medicine by Ms. P.J. MacLellan Shaw, Sport Medicine Council of Canada; Linda Wheeler, Sport Information Resource Centre; and Helen Chambers, A.D. Harvey Nutrition Consultants. Refreshments were served.

2. January 9, 1986. Canadian Dental Association

   The second business meeting of the season was conducted. The guest speaker, Allen Gower, Senior Methodologist, Questionnaire Design Resource Centre, Statistics Canada spoke on "Evaluation of Library Services - Survey Questionnaires". This talk proved to be one of our most successful in some time. Afterwards, members had an opportunity to ask questions of the speaker, and mingle over refreshments.

3. April 17, 1986

   This season's social meeting will be a luncheon held at Titbitz Restaurant. At that time, it is hoped that the new executive can be introduced. To date, only Linda Wheeler, 1986/87 President, has been identified.

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TORONTO HEALTH LIBRARIES ASSOCIATION ANNUAL REPORT

Beverly Brown
President

I am pleased to submit this annual report for the Toronto Health Libraries Association for the period July 1, 1985 to June 30, 1986.

The Executive and the editorial personnel for the 1985-86 association year have been:

President	- Beverly Brown	Past-President	- Jan Greenwood
Vice-President	- Catherine Pepper	Newsletter Editor	- Mary Boite
Secretary	- Lynda Baker	Assistant Editor	- Rita Shaughnessy
Treasurer	- Catherine Weisenberger	Editorial Assistant	- Susan Hendricks

As THLA President, it has been a pleasure to work with an Executive that is so committed to the professional growth of the association. To Catherine Pepper, in her role as programme planner, I must extend my particular appreciation for providing such varied and stimulating programmes.

Five general meetings were held during the year. The first took place on October 21, 1985 at the Toronto Institute of Medical Technology. Wendy Taylor, Co-ordinator of the Advanced Life Support Program in Toronto, described the historical context, rationale and provision of emergency pre-hospital services. THLA member Lynda Baker followed with a brief summary on database searching for material on emergency services.

Our annual Christmas party was held on December 9, 1985 at the Ontario Cancer Institute Staff House.

Toronto's Northern District Library was the location of our February 4 meeting. April Windus, Health Sciences Librarian with the Hamilton Public Library spoke to members and interested public libraries on the building of a health sciences collection and the provision of health information to the general public.

On March 24, the association met at the Parke-Davis/Warner Lambert Pharmaceutical Co. After a pre-meeting buffet dinner, and a business meeting, the members were shown slide presentations by two company pharmacists - one on the history of pharmacy and the other on self-medication and the elderly. THLA member Edna Allen then provided a short history and tour of the Warner Lambert Library.

Our annual dinner meeting was held on Monday May 5 at Toronto's Westin Hotel. Guest speaker Kathleen McConnell discussed the bias against women in the medical literature and in the practice of medicine.

In the past year the association has grown in a number of directions. Our two special interest groups - the Microcomputer Users' Group and the Quality Assurance Interest Group, have continued to meet. The library personnel serving various rehabilitative centres decided to be recognized as a third special interest group of THLA, under the name, Disability Resource Library Network.

THLA responded with concern to the Canadian Hospital Association proposal to assume responsibilities for providing Medlars services to hospitals. A commentary on Andrew Cameron's Presentation to the 1985 Health Administration Forum was prepared, as well as a more detailed letter outlining our questions and criticisms regarding the proposed new C.H.A. information network.

The Upstate New York and Ontario Chapters of the Medical Library Association and THLA jointly mailed an invitation to the M.L.A. executive urging M.L.A. to consider Toronto as the site of a future conference. Indications are that the earliest possible date would be 1993.

Work on the fifth edition of the THLA Union List of Periodicals is progressing slowly but steadily.

Past-President Jan Greenwood has produced a THLA brochure. Copies were on display at the CHLA Montreal conference.

The Nominations Committee, chaired by Jan Greenwood, worked hard to encourage eight candidates to run for offices for the 1986-87 association year. A gratifying 60% of the ballots were returned and the election results were announced at our Annual General Meeting.

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WINDSOR AREA HEALTH LIBRARIANS ASSOCIATION (WAHLA) ANNUAL REPORT APRIL 1985 - MARCH 1986

T. Janik, President
A. Henshaw, Secretary

1. **The Windsor Area Health Librarians Association** met as a full group twice this year with Windsor hospital librarians meeting several times for smaller sessions.

2. **Conferences attended:**

   Two WAHLA members attended the London Special Library Group Conference on "Reference Interviews" in September. Two members attended the meeting at the O.M.A. in December to initiate a hospital librarians' association for Ontario. Two members attended the MEDLINE update workshop in Detroit, as well as the Quarterly meetings of the Metropolitan Detroit Medical Library Group. Two WAHLA members were also among the seven Canadians who attended the 5th International Congress of Medical Librarians in Tokyo in October. They all reported back to the group on any new or interesting aspects of the conferences.

3. **Quality Assurance:**

   Another session on Quality Assurance was held in October, with three more Quality Assurance areas worked through. A project on Q.A. Inter-library Loans requested among WAHLA members was undertaken to check conformity of forms. I.L.L. written policies from each institution were distributed.

4. **Ongoing projects:**

   Such continuing projects as the Repository Journal Agreement, the Inter-library Loan agreement with the Detroit group and the updating of Grace and Hotel Dieu's library holdings on O.C.L.C. in Michigan are periodically reviewed.

5. **The serials list** is in current revision.

Chapter News: Anne Henshaw and Hedy Bahr returned in great spirits from the 5th I.C.M.L. and a tour of China and Hong Kong.

A Spring luncheon and Christmas dinner were enjoyed by the group, as was the Summer luncheon on board the Lansdowne in Detroit.

QUELQUES NOUVELLES DU GROUPE D'INTERET DES BIBLIOTHEQUES DE LA SANTE DE L'ASTED

Louise Deschamps
President

Pour l'année 1986 les membres de l'exécutif sont:

Louise Deschamps, présidente
Robert Aubin, secrétaire
Madeleine Dumais, Francine Garneau, Johanne Hopper,
Gilberte Poirier, Pierre Duchesneau

Depuis le congrès annuel 1985, vous n'avez peut-être pas reçu de nos nouvelles, mais ne vous inquiétez point, nous pensons à vous. Voici une liste de nos réalisations et de nos activités futures:

1. Fort probablement dans le numéro de juin 1986 de **Documentation et bibliothèques**, vous pourrez lire un article de Madeleine Dumais sur l'évaluation de l'efficacité d'une petite bibliothèque.

2. Le groupe d'interêt des bibliothèques de la santé sera présent au congrès de l'Association des hôpitaux du Québec, les 28 et 29 mai 1986. (Voir lettre jointe: TRES IMPORTANT).

3. Louise Deschamps assistera à un atelier du congrès de l'ABSC (association des bibliothèques de la santé du Canada) afin de leur faire une présentation des activités de notre groupe au sein de l'Asted. (le 17 juin 1986 à 11h30).

4. N'oubliez pas le congrès annuel, qui, cette année, se tiendra conjointement avec la Canadian Library Association du 18 au 24 juin 1986 à Québec. Voici un apercu de ce que nous avons organisé pour vous le **vendredi 20 juin**:

   a) 10h30 à 12h00: démonstration du système de courrier électronique ENVOY 100

   b) 12h00 à 12h30: assemblée générale

   c) de 12h30 à 14h00: déjeuner libre

   d) de 14h00 à 15h30: atelier portant sur l'étude de comportement de utilisateur d'une bibliothèque. Quelle est la philosophie d'une bibliothèque quand on considère l'usager comme un client?

   e) dès 18h30: dîner-rencontre organisé spécialement pour vous. Au restaurant "La Différence". Occasion de détente.

   VOUS DEVEZ **PENSER** TOUT DE SUITE A **RESERVER** CETTE JOURNEE du 20 juin que vous ne devez pas manquer.

5. Le 19 février 1986, nous apprenions que la publication de la traduction en français du MeSH est prévue pour la fin du premier semestre 1986. Nous vous en reparlerons.

THE ROLE OF THE HEALTH SCIENCES RESOURCE CENTRE AND HEALTH INFORMATION NEEDS: A Brief to the Director of the Canada Institute for Scientific and Technical Information (1)

The Canadian Health Libraries Association

The Special Resource Committee of the Association of Canadian Medical Colleges

I. INTRODUCTION

When the Association of Canadian Medical Colleges (ACMC) published Beatrice Simon's landmark report, **Library Support of Medical Education and Research in Canada**, the seed was sown for an organization dedicated to serving the needs of the health library community. The Simon Report reviewed the strengths and weaknesses of the medical information system in Canada. It revealed the poverty of the medical school libraries which had, perforce, to act as the resource libraries of our country; it observed the absence of adequate teaching hospital libraries; it described the difficulties the members of the health science community experience in accessing the meager resources available; and it emphasized the impact that our deficient resources had on the research endeavour.

It was recognized in the Simon Report that the Medical Research Council policy of funding research at the universities rather than at the central laboratories such as the National Institutes of Health (NIH) or the National Research Council (NRC) had created a situation which made the establishment of a large central library of medicine, without a local clientele, unreasonable. It recognized the requirement that the universities form a decentralized national library of medicine and that, under a decentralized system, there was need for a central co-ordination and resource agency. Thus, the first two recommendations were:

1. That a National Bibliographic Centre and Information Service be established in the very near future;

2. That the library with which the National Bibliographic Centre is associated be developed as the main reservoir in Canada to serve in lieu of a national medical library. (Simon, 1963, p.90)

The Simon Report was accepted and acted upon by the ACMC. It resulted in increased support for the faculty libraries that would form the nodes of a decentralized library system across Canada. Further, it resulted in an ACMC committee, chaired by John B. Firstbrook, being charged to make recommendations for the establishment of a national bibliographic resource, taking into consideration the desirability of making the most effective use of existing resources.

The Firstbrook Report, issued in May of 1966, recommended that a Health Sciences Centre (HSRC) be created to provide reference and bibliographical services in the medical and health sciences, to co-ordinate and support the acquisition and use of

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(1) Although this report has been available to members since May 1985 the **BMC** editors withheld publication pending CISTI's response which follows on p. 36.

publications in these areas, and to provide leadership in medical library practice. It further recommended that the Centre be established within the National Science Library (NSL), then the only federal library in the sciences with a national mandate, a strong collection in literature related to medicine and the computer expertise seen to be so important for the Canadian development of MEDLINE. The fact that the Medical Research Council (MRC) was then a part of the NRC, as was the NSL, was an additional influence on this decision. The Report also recommended that the National Science Librarian appoint a director of the Centre at a very senior level (Firstbrook, 1966, p. 23)

The recommendations, strongly supported by both the ACMC librarians and the ACMC executive, were forwarded to, and accepted by, the Government. The mandate of the National Science Library was expanded to include biomedicine and the Health Sciences Resource Centre was created in 1967. The position of HSRC Head, reporting directly to the National Science Librarian, was advertised and Miss Hilda MacLean was appointed Acting Head until the position could be permanently filled.

II. THE EARLY YEARS

George Ember served as the Head of the HSRC from 1968 through 1970 and June Huntley from 1971 through 1973. These two used the Firstbrook Report as the foundation for the development of a Working Program that became the yardstick with which the successes and shortfalls of the Centre were measured during its first years. Because of the absence of the recommended advisory committee, reports were made annually to the Special Resource Committee of the ACMC.

Mr. Ember's Annual Report to the ACMC Committee in 1973, entitled "Present Status and Objectives of the Health Sciences Resource Centre", addressed each of the objectives of the Firstbrook Report. The **Union List of Scientific Serials in Canadian Libraries** had been expanded; **Canadian Locations of Journals Indexed in Index Medicus** had been published annually since 1970; the capability to produce provincial, regional, local and institutional union lists on request for those libraries reporting to the **Union List** had been set in place; a Canadian MEDLARS centre had been established; all new titles which appeared in the **Index Medicus** were being automatically subscribed to by the NSL, as were subscriptions to unique titles discontinued by other libraries; **Health Science Serials on Order** had been published since 1969; rarely used backfiles from McGill and University of Toronto had been transferred to NSL; two summer seminars had been organized for mid-career medical librarians; and funds were available from the NRC Scholarship Program for candidates who wished to become medical librarians (Ember, 1973, p 3-5)

Given this long litany of achievements and successes, it is not surprising that a development documented in Mr. Ember's report was accepted, with the reassurance given that it would not affect the status of the HSRC Head. Mr. Ember notified the Committee of plans to change the reporting structure of the National Science Library. The HSRC, which had reported directly to the National Science Librarian, would be placed within the Reference Department and would report through the Chief, Information Services. This seemingly minor alteration to the organization would have a lasting impact on the strength of the HSRC and, in years to come, would cause unforeseen difficulties due to the functional organization of the Canada Institute for Scientific and Technical Information.

III. THE MIDDLE YEARS

The early years had seen the immediate problems of the large health science libraries partially met. MEDLINE had become an accepted part of the information armamentarium,

the back-up resources in medicine and its basic sciences had been built, and the medical school libraries had been developed and expanded. It was with the removal of the most pressing problems of the 1960's, that the problems that had been masked by them became evident. The weaknesses of the second layer of the decentralized network had not yet been addressed although they had been acknowledged both in the Simon Report and the Firstbrook Report. The health science library community recognized this weakness and the Canadian Health Libraries Association (CHLA) was organized to give a forum to the larger group.

The NSL was reorganized as the Canada Institute for Scientific and Technical Information (CISTI) and, despite the reassurances of 1973, the Head of the HSRC was classified at a lower level than the other Heads who reported through the same senior officer. In a governmental reorganization, the MRC was moved from under the aegis of the NRC and placed within the Department of National Health and Welfare.

In 1977, a review of the National Library objectives and services led to the submission of a brief to the Director of CISTI by the ACMC Special Resource Committee on Medical School Libraries. Two of its recommendations were of particular importance in recognizing the changes that had taken place:

> That the role and functions of the Health Sciences Resource Centre and its staff be reviewed and strengthened. (ACMC, 1977, p.1)

This recommendation was made in response to the organizational change previously described. The ACMC Librarians expressed their belief that the HSRC Head must be a senior staff member at CISTI in order to advise and inform the health library community on new developments and to be in a position to ensure that their needs would be made known to CISTI. Their concern had been heightened by the fact that the position had turned over five times in twice as many years.

> That a small advisory committee be established to make specific suggestions regarding activities which HSRC should carry out or promote. (ACMC, 1977, p.7)

This recommendation was made in recognition that the larger health science library community required more direct contact with the HSRC and with the Director of CISTI, and that the circumstances which had made the earlier establishment of an advisory committee impossible to implement had changed with the incorporation of CHLA.

The Director of CISTI acted promptly on this second recommendation and the Advisory Committee on the Health Sciences Resource Centre was formed. Perhaps in recognition of the validity of concerns expressed in the first recommendation, the Committee was made advisory directly to the Director of CISTI.

By 1978, Eve-Marie Lacroix had assumed the position of Head, HSRC. In an annual report she traced the evolution of the HSRC during its first ten years. She described the role of the HSRC within CISTI as the national information and referral centre for the Canadian health sciences community. She outlined the special consulting services available on special projects, collection development, union lists, information on automation. She noted that the HSRC, like its user libraries, was influenced in setting priorities by the demand for services offered. (Lacroix, 1978, p. 2-4)

IV. THE RECENT PAST AND THE PRESENT

Library services are strongly influenced by user activity. They are not mounted or maintained in a vacuum but require an involved and active user group for their justification. In 1974-75, the HSRC statistics reported that 17% of reference queries came from the private sector while 41% came from the health library community. (Nevill,

1975, p.2) In 1981-82, the statistics showed that 42% of the queries were from the private sector and only 22% from health libraries. (CISTI, 1983, p.4) Because the HSRC must be responsive to its primary user community, there is a risk that the very group that recommended its establishment and is represented on its Advisory Board will lose some of its influence.

The Health Sciences Resource Centre has been described as a window into the full range of services provided by CISTI. The statistics suggest that many Canadian health librarians have been looking in that window and leaving it at that. The present unhappiness with the services of the HSRC has been blamed on the HSRC itself, or on CISTI, but seldom on the user community. Surely all of the people who have been involved in the design of services, the provision of services, and the acceptance of services hold some responsibility for the present situation.

Like all good works, the Firstbrook Report can be twisted into a deadly weapon. The authors of the Report did not believe that it was the total solution; they saw it as one step toward the fulfillment of the Simon Report recommendations. Its creators believed that the HSRC could and would be shaped, by its Head and by its user community, into a dynamic agency. Its development still depends on its active use in the bibliographic network. The recommendations below suggest methods by which its services might be more easily used by the health science library community. If they are implemented, the responsibility for using and honing them will rest with the health science libraries of Canada.

V. THE FUTURE

The HSRC is providing a range of high quality services that should be continued and supported. In particular, it is recommended that the publication of useful directories and the provision of MEDLARS training be maintained and expanded as required to meet future demands.

The following recommendations for actions reflect some of the perceived additional needs and desires of Canadian health librarians. These could all be implemented with CISTI's own stated objectives and HSRC's stated mandate. They are grouped together under the general headings in the original mandate of the HSRC.

A. Reference and Bibliographic Services

1. In order to provide access to the consultation services which are already in place, it is necessary that health libraries across Canada be able to call in to the Centre freely. It is recommended that a toll free line by which Canadian librarians can easily access the staff of the HSRC be put in place.

2. In order to promote the services which are available, it is important that the HSRC communicate with its user group, even those who are not at present in MEDLARS Centres. To this end, it is recommended that a newsletter be sent to all libraries included in the CISTi publication **Health Information in Canada: Libraries** on a quarterly or more frequent basis.

3. The Centre should undertake some of the work that might best be done by a central agency. To this end, it is recommended that the HSRC mount a database of materials recommended for small health libraries in Canada and maintain it so that printouts would show the most recent editions and prices. It is further recommended that the HSRC assume responsibility for maintaining the revised editions of bibliographic and directory information contained in **CANHEALTH.** It is recognized that both these endeavours would involve the active co-operation of health science librarians.

4. In 1963 it was recommended that a union list of health periodicals be produced in running title order. With the advent of AACR2 the publication of **Canadian Locations of Journals Indexed for MEDLINE** has come closer to that ideal. High priority should be given to continuing to improve the bibliographic citations in union lists so that these reflect correct AACR2 form of entry. It is further recommended that journals indexed for the Health Planning and Administration database be included.

5. It is recommended that the HSRC provide information regarding the services of the translations index section of CISTI to the HSRC user community.

B. Co-ordination and Support of Acquisitions

1. The Centre, through its host library CISTI, is a foreign partner in the National Library of Medicine's MEDLARS program. As such, it is recommended that the HSRC continue to represent Canadian interests during negotiations with the NLM regarding predicted price increases for foreign users of products and services. The effect of a large price increase for NLM products would be devastating to the health science library community, and for Canadian health care providers and researchers.

2. The HSRC has worked to ensure that the back-up collection needed by the health science community is in place. To further improve the collection, it is recommended that the HSRC encourage CISTI to include material in the area of health administration and, if necessary, to revise their selection policy accordingly. It is of particular importance that those serials lost through the elimination of the Canadian Hospital Association Library be made available.

3. It is recommended that the HSRC encourage CISTI to acquire the National Library of Medicine videotapes which are available in the Regional Resource Libraries in the U.S., but cannot be obtained in Canada. These videotapes could then be made available to the health library community through inter-library loan.

4. The HSRC has continued to try to ensure that all MEDLINE titles are available, if needed, in Canada. It has also, in the past, picked up unique titles in the **Union List of Scientific Serials** that had to be cancelled. It is recommended that the HSRC continue to monitor closely those health titles which are not available in Canada.

5. At one time CISTI offered subsets of the union lists of scientific serials held by libraries to participating libraries. It is recommended that urgent priority be given to reinstating the capability for a library or a group of libraries to obtain a print-out of all reported titles and that this be expanded to include all titles, including the social sciences and humanitites, reported to CISTI or the National Library. Once this is implemented, it is recommended that such lists be made available, both for checking and for local union list purposes, at a reasonable cost.

C. Leadership in Library Practice, Research and Education

1. As the Canadian Centre for MEDLARS, it is recommended that the HSRC (through its newsletter) inform health librarians of proposed or actual policy changes within the National Library of Medicine that could directly affect their services.

2. It is increasingly difficult for librarians isolated in smaller health libraries to keep abreast of technological changes. It is recommended that the HSRC take an active role in education and support needed by this segment of its user community.

Thus, the HSRC should take the lead in the Canadian health science community in investigating such developments as BRS/Saunders, electronic publishing, integrated library systems, **Index Medicus** subsets, etc., and update its users through whatever medium is most appropriate. It is recommended that the HSRC act as an information broker for Canadian health libraries.

3. The HSRC has, in the past, sponsored continuing education seminars for health science librarians. These were well received and beneficial to the community. It is recommended that the HSRC investigate the possibility of developing further sessions in conjunction with the CHLA Education Committee.

4. CISTI encourages students interested in science librarianship to undertake practical work in that library. It is recommended that the HSRC actively recruit students who are interested in becoming health science librarians to work within the Centre, and that the HSRC promote the awareness of the availability of scholarship funds from the National Research Council for future health librarians.

If the above recommendations are acted upon, the requirements for the position of Head, HSRC, will need to be reviewed. It will be essential for the incumbent to have a background in the health sciences, a knowledge of advanced information technology and an established reputation in the health science library community. In order for the incumbent to function effectively in a leadership role, it will be important that the Head be appointed at a senior level, as was clearly intended by the Firstbrook Report.

The human resources available to the HSRC will have to be reviewed and, where staffing levels will not permit recommended activities, the possibility of contracting outside services should be explored.

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Firstbrook J.B., Kerr A.M., Peel B. and Smiley R.K. **A National library resources centre for the health sciences in Canada.** The report of a committee to the Association of Canadian Medical Colleges and to the Committee on Medical Science Libraries of the Canadian Library Association. Ottawa: The Committee, 1966.

Lacroix, E. **Health Sciences Resource Centre: Annual report to the Special Resources Committee on Medical School Libraries of the Association of Canadian Medical Colleges.** Report presented at the meeting of October 15, 1978, Toronto 1978.

Nevill A.D. **Health Sciences Resource Centre - ACMC report.** Report presented October 1975, Ottawa 1975.

Simon B.V. **Library support of medical education and research in Canada.** Ottawa: The Association of Canadian Medical Colleges, 1963.

APPENDIX I

CHRONOLOGY OF EVENTS

1964 Simon Report published: **Library Support of Medical Education and Research in Canada.**

1966 Firstbrook Report published: **A National Library Resources Centre for the Health Sciences in Canada.** The Report of a Committee to the Association of Canadian Medical Colleges and the Committee on Medical Science Libraries of the Canadian Library Association.

1967 Health Sciences Resource Centre established.

1974 Canada Institute for Scientific and Technical Information formed through the amalgamation of the National Science Library and Technical Information Services.

1976 Canadian Health Libraries Association formed.

1977 Brief submitted to the Director of the Canada Institute for Scientific and Technical Information by the Special Resource Committee on Medical School Libraries of the Association of Canadian Medical Colleges.

1978 Advisory Committee on the Health Sciences Resource Centre established.

1982 Matheson Report published: **Academic Information in the Academic Health Sciences Centre; Roles for the Library in Information Management.**

APPENDIX II

HEALTH SCIENCES RESOURCE CENTRE HEADS

Marilyn Schafer	1982 -
Bonita Stableford	1981 - 1982
Eve-Marie Lacroix	1977 - 1980
Philippe Lemay	1976 - 1977
Ann Nevill	1974 - 1976
June Huntley	1971 - 1973
George Ember	1968 - 1970
Hilda MacLean (Acting Head)	1967 - 1968

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THE ROLE OF THE HEALTH SCIENCES RESOURCE CENTRE AND HEALTH INFORMATION NEEDS: THE CISTI RESPONSE

E.V. Smith
Director, CISTI

I. INTRODUCTION

The report **The role of the Health Sciences Resource Centre and health information needs** was transmitted to and received by the Director of the Canada Institute for Scientific and Technical Information in May 1985. We thank the committee for taking the time to prepare this report and congratulate the committee members on their work. This clear, concise statement of the health library community's position and needs will be of great value to us in planning for the years to come.

CISTI's initial response to the report was presented at a joint meeting with the Board of Directors of the CHLA and the ACMC Special Resource Committee on Medical School Libraries in October 1985. We have expanded our response to incorporate the many excellent suggestions which were made at that meeting.

We have treated this document as an audit report and you will note that all responses to recommendations begin with the statement "Accepted" or "Rejected".

II. RESPONSE TO THE RECOMMENDATIONS

A. Reference and Bibliographic Services

1. Accepted. CISTI will explore the feasibility of initiating a toll-free line and will report to the Board on this matter as soon as possible.

2. Accepted. CISTI agrees that HSRC clients should have some means of receiving regular information on services and activities. CISTI has published a regular quarterly newsletter, **CISTI News/Actualites ICIST**, for several years, which was well received by the community. We feel that **CISTI News** can be expanded easily to include HSRC news. Therefore, effective immediately, all HSRC clients will be put on the **CISTI News** mailing list. The Head of HSRC has joined the Editorial Board of **CISTI News** and will contribute a quarterly column on HSRC activities.

   We will monitor this situation closely. We welcome any comments or suggestions on the HSRC column, or on **CISTI News** in general, over the next few issues. If, after a reasonable trial period, this arrangement does not meet the need which you have expressed, we will consider other alternatives.

3. Accepted. These lists are very small and could be mounted on the IBM/PC relatively easily. The bibliography could then be distributed on floppy disk or on paper, depending on client preference. A small fee may be necessary to cover costs.

   The CANHEALTH bibliography could be updated annually or as resources permit. We will depend very heavily on health science librarians for recommendations on items for inclusion or deletion.

4. Accepted. CISTI agrees that high priority should be given to providing the best possible journal citations in **Canadian Locations of Journals Indexed for MEDLINE**. Title access has now been provided for virtually all bibliographic records appearing in the 1986 edition, either directly or through cross references. New entries are in accordance with AACR2 rules.

   CISTI has included journals indexed for the Health Planning and Administration database in **Canadian Locations of Journals Indexed for MEDLINE** for many years. Journals for which there are no Canadian locations are not listed in this publication. Such journal titles are reviewed and purchased by CISTI if they are within CISTI's acquisitions guidelines.

5. Accepted. The Translations Index brochure has been sent to HSRC clients. We have also publicized the Translations Index in **BMC** and **Les nouvelles de l'ASTED.** Any further suggestions on how to promote the Index to HSRC clients will be welcomed.

B. Co-ordination and Support of Acquisitions

1. Accepted. CISTI continues to represent Canadian interests at the NLM. Mr. Elmer Smith has been invited by Dr. D.A.B. Lindberg to sit on a panel entitled "Obtaining Factual Information from Databases", which will advise NLM on the development of its five-year plan. Although CISTI's role as an International MEDLARS Partner is purely advisory, NLM has always been very responsible and responsive to user needs. We are confident that NLM would not willingly implement any changes that would negatively affect the foreign centres.

2. Accepted. CISTI is aware of the need for more health administration materials, and has been actively seeking ways to improve the collection in this area. CISTI has already checked its journal holdings against those of the CHA Library. In fact, there was considerable overlap in the collections. CISTI has already ordered the few journal titles which it did not already hold.

3. Accepted. CISTI itself does not collect audio-visual materials. However, it supports the Canadian Science Film Library and has a staff member on the CSFL Board.

   As a result of an HSRC Advisory Committee resolution a list of NLM produced videotapes was obtained and passed on together with ordering information to the Canadian Science Film Library. The CSFL has a lending service which seems to be functioning well now in spite of past difficulties. Progress will be reported to the Advisory Committee on a regular basis. At this time the CSFL is pleased with our recommendations and is ordering them gradually, as staff resources permit.

4. Accepted. The HSRC will continue its efforts to ensure that MEDLINE titles are available in Canada, and to pick up cancelled subscriptions whenever possible.

   On the recommendation of the HSRC Advisory Committee the "No Canadian Locations" list will be sent to all MEDLARS Centres in the future so that it can be used by others, as well as by CISTI and the medical school libraries, as an acquisitions tool.

5. Accepted. As a member of the DOBIS Planning Committee, CISTI sits with the National Library twice a year to set priorities and assign financial and human resources. CISTI is currently represented on a Task Force of the Library Systems Centre at NL to investigate the feasibility of producing such lists. A meeting of representatives of associations which wrote to the Director of CISTI and the

National Librarian on this topic was held last fall and the Task Force has reported its findings to the Group.

A pilot project on automated file transfer to DOBIS was recently completed by the National Library and a report on this will be issued in the future.

C. Leadership in Library Practice, Research and Education

1. Accepted. The HSRC sends notices of policy updates, changes and new policies to MEDLARS Centres together with the **NLM Technical Bulletin** and the **MEDLARS Canada** newsletter. We have become aware recently that these may often go only to the primary searcher in a large organization or to the Health of Public Services and not reach the administrative head. Some organizations request several copies of the monthly package so that all who require a set will have one. We can supply as many copies as necessary, on request.

   We are not always informed in advance of changes. This usually occurs in regard to the exact date of implementation of a change rather than with a policy itself. We have on occasion learned by reading the online **News** in the morning that a given database is now available to foreign users, for example.

   The suggestion has been made that much of what we report in **MEDLARS Canada** regarding NLM policies could bear repetition and dissemination to a wider audience. We hope to achieve this through our regular columns in **Bibliotheca Medica Canadiana, Les nouvelles de l'ASTED** and **CISTI News.** We welcome any suggestions which the Board may have for broader dissemination of the information.

2. Accepted. HSRC is well equipped to act as an information broker for Canadian health libraries, as it has the immense resources of CISTI and the National Research Council as back-up. We have been able to act as a clearinghouse or referral centre on many occasions for individual requests.

   For example, when several libraries called us when they were concerned about how to charge their clients literature searches under the new algorithm, we were able to put them in touch with each other. More recently a medical school library director called with questions on telefacsimile and journal subscription agencies.

   With the co-operation of CHLA, ACMC and the Advisory Board, it would be possible to expand and advertise this function of HSRC within the community. HSRC will explore, with the associations, means of pooling our respective resources and knowledge, to provide a more comprehensive service. At the 1985 CHLA conference, an annual update session called **User Group Meeting**, was held, and various organizations reported on areas of mutual interest. A second **User Group Meeting** is planned for the 1986 CHLA Conference. In addition, local committees could prepare subject reports and deposit them with HSRC for reference and dissemination. Clients of the clearinghouse service could be asked to deposit a written report of the results of using this service, (e.g. what worked, what didn't work, why). The medical school libraries could report quarterly or annually on their activities.

3. Accepted. During the past year the staff of the HSRC have developed two new courses (Toxicology and Strategy) and have begun offering them across the country. During the coming fiscal year, we plan to develop a course for end-users. Other courses will be developed and offered as resources permit and as priorities indicate.

HSRC staff will continue to be active in CHLA and will continue to assist the Association with its CE efforts. CHLA is surveying its members on continuing education needs. HSRC will study the survey results carefully, and take them into consideration when developing new courses in the future.

4. Accepted. CISTI distributes NSERC Scholarship information to the Library Schools and to various science faculties in universities. CISTI has in the past welcomed students interested in science librarianship as summer workers. HSRC has always been willing to accept those who particularly express an interest in health librarianship.

   CISTI also welcomes guest workers on occasion and would be most happy to receive appropriately qualified guest workers in the health science information field.

CONCLUSION

In addition to its specific recommendations, the committee raised several issues of general concern: the reporting structure of HSRC, the level of the Head of HSRC, the role of the Advisory Board on the HSRC, and the staff resources assigned to HSRC.

In describing the evolution of HSRC, the committee noted that the re-organization of 1973 placed the Health Sciences Resource Centre under the Head, Information Services who in turn reported to the Chief, STI Operations also known as Chief, Library Services. HSRC now reports on the same level as the Head, Information Services to the Assistant Director of CISTI. This reporting structure restored HSRC to the position it held before 1973. In addition, there is now a "dotted line" reporting relationship to the Director of CISTI., who decides on all policy matters.

The position level of the Head of HSRC is currently under review, and the committee's suggestions will certainly be taken into consideration.

The report also noted that the HSRC now serves a higher percentage of private sector clients than health library clients, and expresses concern that the HSRC Advisory Board, consisting of health librarians, may lose some of its influence as a result. CISTI, as a client-driven organization, will continue to set its priorities in response to the expressed needs of the clientele. We will certainly have to heed the concerns of new and growing client groups for HSRC as we have for our other services, which are experiencing the same rapid growth in private sector clients. Our other service groups have been able to serve all sectors in a satisfactory manner, and we expect the HSRC to do the same.

CISTI has always relied on the Advisory Board on the HSRC to convey to us the priorities of the health information community. The Advisory Board is the principal body which represents the health information community at CISTI. We deeply appreciate the Board's contributions over the years and look forward to continued co-operation with the community through the Board.

The committee commented on the human resources available to the HSRC. Over the past few years, CISTI has experienced considerable growth in demand for all of its services. At the same time, our growth is restricted by staffing restraint policies which seem to be common to like institutions all over the world. CISTI Management is actively exploring all available means to manage this situation, including automation, contracting-out, use of short-term assistance, summer students, scholarship students, guest workers, streamlining procedures, etc. So far we have managed to maintain and even improve our productivity, and we expect to continue to do so, in HSRC and in our other services.

The current climate of restraint may affect the time frame within which recommendations with resource implications can be implemented. Nonetheless, we are committed to working with you to improve the delivery of health information services in Canada. Difficult times can be beneficial in that they challenge us to be resourceful and to find the best, most efficient ways of doing things. We are confident that through co-operation we will find the means necessary to achieve our common goals.

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CALL FOR PAPERS

BMC, Vol. 8(2) will largely be devoted to the proceedings of the 10th Annual Meeting. If you gave a paper which has yet to be submitted to **BMC**, please forward it to Tom Flemming by September 12, 1986.

The editors would be grateful for a response from readers to the last **Call for Papers**, 7(5): 219. Themes must be planned for Vol. 8, issues 3 and 4, and your views will be taken into consideration.

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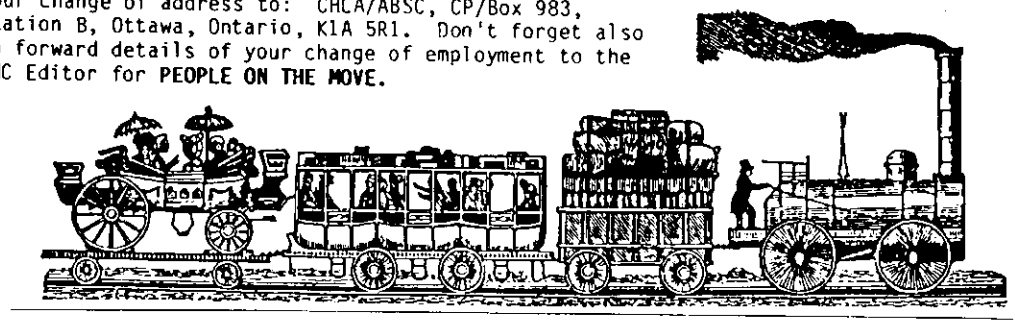
Are You Moving?

If you are planning to move within the next few months, please assist CHLA in keeping its records current and ensure that you will continue to receive **BMC** by submitting your change of address to: CHLA/ABSC, CP/Box 983, Station B, Ottawa, Ontario, K1A 5R1. Don't forget also to forward details of your change of employment to the BMC Editor for **PEOPLE ON THE MOVE.**



SUMMARY OF SHERRY TURKLE'S PRESENTATION ON COMPUTERS AND THE HUMAN SPIRIT, MLA Annual Meeting, Minneapolis, MN, May 22, 1986

Joanne Marshall

Department of Behavioural Science
University of Toronto

For many of us attending this year's MLA meeting, the highlight was Sherry Turkle's McGovern Award Lecture. Turkle has a joint Ph.D. in sociology and psychology from Harvard and is an associate professor at the Massachusetts Institute of Technology (MIT). Her recent book, **The Second Self: Computers and the Human Spirit** (N.Y.: Simon and Schuster, 1984), has won her several awards. It is rare to find a speaker who can communicate effectively with a large audience and at the same time convey a lot of content in a presentation. I think that Turkle felt particularly at ease with the librarian audience since she views the computer culture as a humanist and clearly sees librarians as humanists as well. She was amusing and personal while at the same time very involved in her analysis on the impact of computers and electronic technology on individuals. The following is a brief summary of her inspiring presentation, but her book (it just came out in paperback) provides a much more complete view of her work which is based on six years of observational field-work.

The most commonly asked question about computers and culture is, "Are computers good or bad?". This is a poor question because it puts the emphasis on the technology and not the people who use it. In the end, it is human culture which determines the impact of technology. Unfortunately computers have been developed by and for engineers - a group more interested in machines than in people. This explains why system documentation is so difficult to read and understand and why women have found it difficult to become involved in computer technology. Turkle urged librarians not to adopt the technocentric view of computer engineers and programmers. She believes that we have the power to orient the computer to human needs.

Most people think of computers as tools which "do" something; however computers also have an affect on us and the way we think. An example is the use of computer language to describe human behaviour. Turkle told of one of her students who apologized for handing in a term paper late by saying that she had been having problems with her boyfriend and had needed time to "debug" their relationship. More and more we seem to be using the new words that describe the operations of computers to describe our own situations. Turkle thinks that computer terminology will be used metaphorically to describe human behaviour. In much the same way, we have seen the body as a machine in the past.

One of the fascinating aspects of computers is what Turkle calls their "holding power". She doesn't like the term computer "addiction" because it limits the kind of analysis which can be brought to bear on the relationship between computers and their devotees. There are four aspects of this holding power:

1. Programming can be seen as an activity in which the programmer takes a little piece of his or her mind, stores it in the computer and then comes to see it differently. This kind of intellectual extention and objectification is very powerful psychologically.

2. Certain aspects of computer use, especially word processing, hold the "promise of perfection" for those among us who are prone to such compulsiveness. It is so easy to keep on correcting, changing and otherwise perfecting a document that many highly paid professionals do just that.

3. Computers provide an answer to the psychological malaise that authors like Christopher Lasch (**The Culture of Narcissism**) say plagues modern society. The essential loneliness and fear of intimacy that many people feel is relieved by computers which respond to commands and provide the illusion of companionship without the demands of friendship.

4. Finally, there are many ways in which computers can be personalized. People make the computer their own in several ways -- by writing their own programs, by participating in electronic bulletin boards, or designing their own online searches. This is an individualized, expressive technology which has a lot of "holding power".

Turkle sees a positive future for the computer culture providing that we use the technology appropriately and are tolerant of the many different ways in which individuals will relate to it. Along with high technology will come a new legitimation of human reason and the things that only people, not machines, can do. We need to reassess human work and see what it is that computers can do and what it is important for people to do.

Turkle's background is in Freudian psychoanalysis, so she is very interested in the effect of personality on computer use. She believes that personality should dominate technology and that we must provide the means for individuals to personalize electronic media. This idea provides an interesting challenge for those of us working in libraries as we tend to standardize rather than individualize. Turkle has provided some basic ideas, but we must the implications for our own working environment.

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NEWS AND NOTES

People on the Move

Kellogg Health Sciences Library
Dalhousie University

Eugene Pelchat, Head of Technical Services, and **Sandra Horrocks**, Head of Inter-library Loans, both left Kellogg at the end of May. Eugene is retiring to his farm in south-central Nova Scotia, while Sandy is moving to New Jersey where **Norman Horrocks** is taking up the position of Vice-President of Scarecrow Press in Metuchen.

Judith Coghlan-Lambly, formerly Eugene's assistant, replaces him as Head of Technical Services. Judith, in turn, has been replaced by **Tim Ruggles**, a graduate of the Dalhousie School of Library Service. Sandra's position has been filled by **Ann Barrett** who has most recently been in charge of the Health Sciences Library at the Saint John Regional Hospital, New Brunswick

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William Boyd Library
Toronto Academy of Medicine

Jennifer Taylor has accepted the position of Reference Librarian to serve the new Veterinary School at the University of Prince Edward Island. Jennifer will be missed by the members of the Academy and the many Ontario hospital libraries for whom she provided service during her two years at the Academy. She will be replaced, however, by two half-time librarians: **Catherine Weisenberger**, who left the Academy in the summer of 1984 for the birth of her first child, will return to her former stomping ground. She will share the position with **Jennifer Armstrong** who has been working, part-time, in the Reference Department of the Science and Medicine Library at the University of Toronto.

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Toronto Institute of Medical Technology

TIMT has lost its Librarian of four years to the more moderate climes of Bermuda. **Patricia Fortin** is to assume responsibility for the libraries of the King Edward VII Memorial Hospital (General) and Saint Brendon's Hospital (Psychiatric).

Ken Ladd, who was hired as Assistant Librarian in April 1986, is the new Librarian. Ken graduated from the MLS program at the University of Toronto in 1986, having formerly obtained the M.Sc. through the Department of Medical Biophysics, also at the University of Toronto.

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St. Joseph's General Hospital
Peterborough, Ontario

Mary Conchelos is the first professional librarian at St. Joseph's General Hospital. She assumed the part-time position in February 1986, having worked the previous twelve years at the Science and Medicine Library, University of Toronto.

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Discard List

St. Joseph's General Hospital Library is willing to donate a large number of pre-1976 medical and hospital administration journals, many of which are bound, to any library willing to pay the postage. Interested CHLA members are invited to contact Mary Conchelos at the address below, before the end of September, if they wish obtain this discard list. (The list has already been distributed to THLA members).

Mary Conchelos,
St. Joseph's General Hospital,
384 Rogers Street,
Peterborough, Ontario
K9H 7B6

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NEW PUBLICATIONS

Health Libraries Directory of the Maritime Provinces, 1985

The second edition of this directory has been expanded to include all institutions in the Maritimes which have education materials.

To obtain a copy of the directory please forward a cheque or money order for $5.00, payable to M.H.L.A./A.B.S.M. to:

Ms. Penny Logan, Librarian,
Izaak Walton Killam Hospital,
5850 University Avenue,
Halifax, Nova Scotia B3J 3G9

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AIDS: acquired immune deficiency syndrome

This 24-page illustrated guide has been prepared by nurses in the Royal Victoria Hospital Department of Nursing in order that others might learn from their considerable experience in caring for patients with HTLV-III infection.

To order a copy send a cheque or money for $10.00, made payable to Royal Victoria Hospital, to:

Communications Services,
Room A1.08, Royal Victoria Hospital,
687 Pine Avenue West,
Montreal, Quebec H3A 1A1

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Evening Primrose Oil Bibliography

CHLA member, **Christina Toplack**, has completed the 2nd edition of this bibliography which contains approximately 300 references and abstracts of 20 of the most important clinical trials. A copy of the bibliography may be obtained, without charge, from:

Efamol Research Institute Library,
P.O. Box 818
Kentville, Nova Scotia B4N 4H8

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Erratum

Physicians Online Report

The cost of the report on the CMA iNet trial is $15.00 per copy, not $10.00 as was reported in Vol. 7(5): p. 218.

UPCOMING MEETINGS

UNYOC 22nd Annual Meeting
Hyatt Regency Hotel,
Buffalo, New York
October 15-17, 1986

The Keynote Speaker at this conference, the title of which is **The Biomedical Literature: Meeting the Challenge**, is Alfred N. Brandon, Medical Library Consultant and co-author of "Selected List of Books and Journals for the Small Medical Library". In conjunction with the meeting, three continuing education courses will be offered on October 15: **MLA CE 342 - Nursing Information Resources, MLA CE 459 - Online Biochemical Searching in the Health Sciences** and **UNYOC CE - Library Ergonomics.** Of particular importance to the conference this year is the Chapter's Business Meeting at which members are invited to participate in a discussion of strategic planning for the Chapter's future growth and direction. To obtain the full program and registration materials contact Carol Lelonek at:

Health Sciences Library
State University of New York at Buffalo
Buffalo, New York 14214

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Ontario Hospital Libraries Association (OHLA)
First Annual Meeting: Measure for Measure
Women's College Hospital, Toronto, Ontario
October 28-29, 1986
Contact: Margaret Taylor, Children's Hospital of Eastern Ontario, Ottawa

The title of OHLA's first annual meeting is **Measure for Measure. Margaret Beckman** will deliver the keynote address, **Measuring Library Effectiveness.** Also on the program is **Allen Gower** of Statistics Canada who will discuss **Designing Library User Surveys.**

The workshop component of the meeting will focus on quality assurance. **Linda McFarlane** Sunnybrook Medical Centre, **Susan Gillespie**, University Hospital, London, and **Susan Hendricks** of Oshawa General Hospital will be the presenters.

Tours and "mini-clinics" at 4 Toronto hospitals are planned for October 29, 1986.

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Ontario Medical Association Biennial Workshop
Toronto, October 27

A one-day introductory workshop on basic library procedures will be offered in response to the demand from OHLA members (and others) who have received no formal library training. Registration information will be mailed during September to all those who have expressed an interest in attending the workshop. Anyone wishing to receive this information should contact the O.M.A. Library.

POSITIONS AVAILABLE

Cataloguer
Medical Library
University of Manitoba
Winnipeg, Manitoba
R3T 2N2

Salary Ranks and Ranges: Commensurate with qualifications and experience:

General Librarian	$22,057 to $38,478
Assistant Librarian	$27,090 to $47,272

This is a two-year term position.

Effective Date: September 1, 1986

Reporting to the Head, Medical Library, the incumbent is responsible for the bibliographic control of all Medical Library materials, for supervision of the work of the Cataloguing Assistant who does derived cataloguing on UTLAS and for original cataloguing of materials for which NLM cataloguing copy is not found. In addition, the incumbent supervises the bibliographic entry of serial records in an automated system and shares responsibility for the analysis, recommendation, and implementation of all automated systems in the Medical Library.

Qualifications:

A degree from an ALA accredited library school or equivalent. Good communication skills and supervisory ability. Some experience with NLM classification and subject headings, and an automated cataloguing system such as UTLAS preferred. An undergraduate degree in the sciences and familiarity with automated library systems would be distinct assets.

Librarians enjoy academic status and are appointed to one of four ranks, General, Assistant, Associate and Librarian with the possibility of promotion.

Both women and men are encouraged to apply. In accordance with Canadian immigration requirements, this advertisement is directed to Canadian citizens and permanent residents.

Submit applications, including resume, salary expectations and the names of three referees by **August 15, 1986** to: Earle C. Ferguson, Director of Libraries, University of Manitoba.

N.B. To accommodate BMC's printing schedule the University of Manitoba is willing to consider applications received after the stated deadline.

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College of Health Sciences
Ministry of Health
P.O. Box 12, Manama
Bahrain (Arabian Gulf)

The medical library is small, but serves a potential 2000+ users. The Ahmed Al-Farsi Library, College of Health Sciences, serves both the College and nearby hospitals. Applicants for the position of Chief Medical Librarian should have the M.L.S. degree and experience preferably in a medical and/or academic library. The ideal candidate will have experience in collection development, budgeting and in training and supervising staff. Personal adaptability, flexibility and management skills are essential.

Persons working on an overseas contract (initially for 2 years) normally receive annual academic leave of 56 days (including air-tickets), paid housing, assistance with children's school fees if required, etc. Salary would be in the range of $42,000 (Canadian) for American or Canadian citizens, **usually tax-free**, and there would be an additional **bonus** of approximately one month's salary for each year worked here.

There are no special difficulties for women working or living in Bahrain, and conditions for family and social life, sports, etc., are generally considered good, and certainly much better than in most neighbouring countries.

Applicants should apply no later than September 1, 1986, and should include copies of university diplomas with their application to: Mr. Faisal Al-Hamer, Dean of the College.

N.B. The Editor has written to Mr. Faisal Al-Hamer to inform him that Canadian applications for this position might be slightly delayed due to the publishing schedule of BMC.

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INFORMATION FOR BMC CONTRIBUTORS

1. MANUSCRIPTS

1.1 The **BMC** editors welcome any manuscripts or other information pertaining to the broad area of health sciences librarianship, particularly as it relates to Canada and specific theme issues as they occur.
1.2 Contributions should be **submitted in duplicate** and the author should retain one copy.
1.3 Contributions should be typed double-spaced and not exceed six pages or 2100 words in length.
1.4 Pages should be numbered consecutively in the top right hand corner.
1.5 All contributions shall be accompanied by a covering letter which should include the author's (typed) name, title and affiliations, as well as any other background information that the contributor feels would be useful to the editorial process.
1.6 Articles may be submitted in French or English but will not be translated by the **BMC** editors or their associates.
1.7 Style of writing should conform to acceptable English usage and syntax; slang, jargon, obscure acronyms and/or abbreviations should be avoided.
1.8 Spelling shall conform to the Oxford English Dictionary, exceptions at the discretion of the Editors.
1.9 Contributors who wish to submit their work in machine-readable format should contact the Editors in advance to ensure that compatible equipment is available in the editorial offices.

2. REFERENCES

2.1 Contributors are responsible for the accuracy of their references.
2.2 Personal communications are not acceptable as references.
2.3 References to unpublished works shall be given only if obtainable from an address submitted by the contributor.
2.4 All references should be given in the Vancouver style; see **Lancet** 1979 24 Feb; 1(8113): 428-430.

3. ILLUSTRATIONS

3.1 Any submitted (black and white) illustrations and tables should be camera-ready for print.
3.2 Illustrations and tables shall be clearly identified in arabic numerals and shall be well referenced in the text.
3.3 All illustrations and tables should include an appropriate title.

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